RT B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 04/26/2005 Platon N. Mandros BURNS, DOANE, SWECKER & MATHIS, L.I P.O. Box 1404 Alexandria, VA 22313-1404 06/30/2005 SHINASS2 00000030 09880007

1400.00 OP

300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name) (Signature) (Date)

02 FC:1504 03 FC:8001 3.00 OP ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR 011350-277 4692 09/880,007 06/14/2001 Yoko Fujiwara

TITLE OF INVENTION: IMAGE PROCESSING DEVICE AND PROGRAM PRODUCT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	07/26/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
AHMED, SAMIR ANWAR		2623		382-182000			
CFR 1.363). Change of correspond Address form PTO/SB/I: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	a 37 CFR 3.11. Completion	Correspondence ation form of a Customer E PRINTED ON THE clow, no assignee data of this form is NOT a	(1) the nator agents (2) the nate (2) the nate (3) the nate (3) the nate (4) the na	near on the patent. If an assign	member a 2 8 1 2 8	rns, Doane, Swecke Mathis, L.L.P. the document has been filed for	
4a. The following fee(s) are		4b. Pa	yment of	Fee(s):		te group entity Government	
X Issue Fcc			 ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. 				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies1		,	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-4800 (enclose an extra copy of this form).				
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Issu ublication Fee (if required) to ords of the United States Pate	37 CFR 1.27.	• • •	cant is no longer claiming SMAL ny) or to re-apply any previously e other than the applicant; a regin		37 CFR 1.27(g)(2). plication identified above. or the assignee or other party in	
Authorized Signature	aus for Jan			Date	6-29-0		
Typed or printed name	ity is governed by 35 U.S.C. oplication form to the USPT of or reducing this burden, sl	11. The information is 122 and 37 CFR 1.14 O. Time will vary dep ould be sent to the Ch	l. This co ending u nief Infon	Registration	no. 28,632 ne public which is to file ninutes to complete, incluments on the amount frademark Office. U.S.	(and by the USPTO to process) luding gathering, preparing, and of time you require to complete Department of Commerce, P.O.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.